



In re Application of:

KAZUYO IKEDA

Application No.: 10/771,293

Filed: February 5, 2004

For: IMAGE SEARCH METHOD AND APPARATUS

Mail Stop Amendment
THE COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Docket No.

00862.023447.

Examiner: Jayesh A. Patel

Group Art Unit: 2624

Date: January 25, 2008

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	14	MINUS	22	= 0	x \$25 \$50	\$.00
INDEP. CLAIMS	3	MINUS	7	= 0	x \$105 \$210	\$.00
Fee for Multiple Dependent claims \$185°/\$370						\$.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$.00

- * If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

January 25, 2008
(Date of Deposit)

Michael J. Guzniczak, Reg. No. 59,820
(Name of Attorney for Applicant)

Signature

January 25, 2008
Date of Signature

- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$ _____ is enclosed.
- ☐ Charge \$ _____ to Deposit Account No. 06-1205.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205.
- ☐ A check in the amount of \$ 120.00 to cover the fee for a One month extension is enclosed.
- ☐ A check in the amount of \$ _____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicant's undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Michael J. Guzniczak
Attorney for Applicant
Registration No.: 59,820

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